

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/589977.

FILING DATE

30 APR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2		/	/			
3		2	/			
4	/		/			
5		1	/			
6		2	/			
7		2	/			
8		2	/			
9		2	/			
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50						
TOTAL IND.	2		2			
TOTAL DEP.	23	◀	19	◀		◀
TOTAL CLAIMS	25		21			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.					◀	◀
TOTAL DEP.		◀		◀		◀
TOTAL CLAIMS	25		21			